UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 2 Seri		al/Patent # 10/5/8525			
3 Please refund the following fee(s):		4 PAF	ER BER	5 DATE FILED	6 AMOUNT
Filing					\$ (0)
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					\$
Petition					\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other					\$
		7 TOTAL AMOUNT S /OU			
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
Overpayment			С	redit Dep	osit A/C #:
Duplicate Payment			9 10 2 750		
No Fee Due (Explanation):					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: John Shidwan			т	ITLE: Par	vkgal Speciali
TYPED/PRINTED NAME: John Mudre TITLE: Paralegal Specialis SIGNATURE: And PHONE: 308-9140 out 24					
OFFICE: PCT- DO/GO ***********************************					
APPROVED: DATE:					
APPROVED:			·: _		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B